

209 NYC Dental LLP

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New York, NY 10022
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Date: 01/19/2025

Payment Receipt

Patient: Daniel Dadoun
Staff: Melanie L
Card: Visa
Terminal ID: XXXXXXXXXXXXXXXX
Trans ID: 000000019975
Order ID: 38812502231431296581
Batch ID: 000617
Trans Type: Purchase
Date: 2025-01-19 13:4117
Card Number: XXXXXXXXXXXXXXX8718
Entry Legend: CHIP READ
Entry Method: CONTACTLESS
Approved Code: 113338
AC: DD6AC424C68C2605
ATC: 0030
AID: A0000000031010
TVR: 0000000000
Res CD: 00
TRN REF #: 305054704185357
VAL CODE: N87H
Total Amount: USD\$291.00
Approved - Thank You